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LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease  
State  Fee

5. State Oil & Gas Lease No.  
-

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name -
2. Name of Operator TEXACO Inc.		8. Farm or Lease Name J. R. Phillips
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240		9. Well No. 6
4. Location of Well UNIT LETTER <u>E</u> <u>660</u> FEET FROM THE <u>West</u> LINE AND <u>1897</u> FEET FROM THE <u>North</u> LINE, SECTION <u>6</u> TOWNSHIP <u>20-S</u> RANGE <u>37-E</u> NMPM.		10. Field and Pool, or Wildcat Monument Abo
15. Elevation (Show whether DF, RT, GR, etc.) 3576' (DF)		12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data.  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

- RIGGED UP. PULL RODS AND PUMP. INSTALL BOP. PULL TUBING.
- SET PKR @ 7039'. ACIDIZE PERFS 7108' - 7710' W/7000 GALS 15 % LST NEFE ACID AND 4100# SALT IN 5-STAGES.
- CLEAN OUT.
- INSTALL PUMPING EQUIPMENT. TEST AND PLACE ON PRODUCTION.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Jerry Sexton TITLE Asst Dist Mgr DATE 5-1-84

APPROVED BY JERRY SEXTON TITLE DISTRICT SUPERVISOR DATE MAY 3 1984

CONDITIONS OF APPROVAL, IF ANY: